## STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

### THE POLITICACOVER PAGE

FEB 2 6 2010 W

Please type or print in ink.



-or-

\_\_/\_\_\_\_, through

O The period covered is \_

Candidate

the date of leaving office.

Election Year: \_

2010 MAR - 1 PA Bublic Document

NAME (LAST) (FIRST)	(MIDDLE) DAYTIME TELEPHONE NUMBER
NAME (LAST) (FIRST)	
DENTAM DETT	J 0 4 N
MAILING ADDRESS STREET CITY	STATE ZIP CODE OPTIONAL: E-MAIL ADDRESS
A Company of the Comp	
1. Office, Agency, or Court	4. Schedule Summary
Name of Office, Agency, or Court:	► Total number of pages
Colitornia LogistaTure	including this cover page:
Division, Board, District, if applicable:	► Check applicable schedules or "No reportable
SKNATE DIST 12	interests."
Your Position:	I have disclosed interests on one or more of the attached schedules;
STATE SENATOR	Schedule A-1 🗶 Yes – schedule attached
▶ If filing for multiple positions, list additional agency(ies)/	Investments (Less than 10% Ownership)
position(s): (Attach a separate sheet if necessary.)	Schedule A-2 Yes – schedule attached
Agency:	Investments (10% or Greater Ownership)
	Schedule B 🔀 Yes – schedule attached
Position:	Real Property
	Schedule C Yes – schedule attached
2. Jurisdiction of Office (Check at least one box)	Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
<b>⊠</b> State	Schedule D X Yes – schedule attached
County of	Income - Gifts
☐ City of	Schedule E Yes – schedule attached
☐ Multi-County	Income – Gifts – Travel Payments
☐ Other	-or-
	No separatable intersects on any ochodule
3. Type of Statement (Check at least one box)	No reportable interests on any schedule
Assuming Office/Initial Date:/	5. Verification
Annual: The period covered is January 1, 2009, through December 31, 2009.	I have used all reasonable diligence in preparing this
-or-	statement. I have reviewed this statement and to the best
O The period covered is/, through	of my knowledge the information contained herein and in any attached schedules is true and complete.
December 31, 2009.	
Leaving Office Date Left://	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
(Check one)	3-13 -13 -13 -13 -13 -13 -13 -13 -13 -13
O The period covered is January 1, 2009, through the	Date Signed 2-/8-/0
date of leaving office.	Date Signed/

Signature

FPPC Form 700 (2009/2010) FPPC Toll-Free Helpline: 866/ASK-FPPC www.fppc.ca.gov

#### **SCHEDULE A-1** Investments

#### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name DENHAM

NAME OF BUILDINGS CUTTED	C. NAME OF SURVISOR SUFFER
NAME OF BUSINESS ENTITY  IC WILLIAMS CONF.	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Real ESTATE FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,000 Over \$1,000,000	\$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  \$100,000
NATURE OF INVESTMENT Real ESTATE  ☐ Stock Stock (Describe)	NATURE OF INVESTMENT Stock Other (Describe)
Partnership O Income of \$0 - \$500 O Income Received of \$500 or More (Report on Schedule C)	Partnership   Income of \$0 - \$500   Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000	FAIR MARKET VALUE  \$2,000 - \$10,000 \$10,001 - \$100,000  \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT  Stock Other
(Describe)  Partnership O Income of \$0 - \$500 O Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership (Income of \$0 - \$500)  Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
J J 09 J J 09  ACQUIRED DISPOSED	
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE  \$2,000 - \$10,000	FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT
(Describe)  Partnership O Income of \$0 - \$500 O Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income of \$0 - \$500 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments:	

#### SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM FAIR POLITICAL PRACTICES C	700 OMMISSION
Name DENAAM	

DENHAM PLASTICS	► 1. BUSINESS ENTITY OR TRUST
Name 1037 Abbott ST. Jalidas CA	Name
Address (Business Address Acceptable) 9390/	Address (Business Address Acceptable)
Check one	Check one
☐ Trust, go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
general description of business activity $MFG$	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000
\$10,001 - \$100,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
X Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Sole Proprietorship Partnership	Sole Proprietorship Partnership
YOUR BUSINESS POSITION MEMBER	YOUR BUSINESS POSITIONOther
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000
\$500 - \$1,000 OVER \$100,000	\$500 - \$1,000 OVER \$100,000
☐ \$1,001 ~ \$10,000	
▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
SEE ATTACHED	
Jee Killery	
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE
BUSINESS ENTITY OR TRUST	BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
DENHAM PLOSSICS	☐ INVESTMENT ☐ REAL PROPERTY
DENHAM PLOSTICS	
Name of Business Entity or	Name of Business Enlity or
Street Address or Assessor's Parcel Number of Real Property	Street Address or Assessor's Parcel Number of Real Property
Plastics MFG	
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$3,10,001 - \$100,000	\$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Masseheld 1 Other	
K Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments:\_\_\_

B&B Plastic Recyclers Inc
Dobler & Sons
Dole Fresh Vegetables, Inc.
Field Fresh Farms
Fresh Express
Go Green Industries
Gold Coast Packing, Inc.
Martines Farming
ORBIS Corporation
Taylor Farms
Taylor Fresh
True Leaf Farms
Watsonville Produce

# SCHEDULE B Interests in Real Property (Including Rental Income)

eal Property htal Income)

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	
Name DEN HAM	

► STREET ADDRESS OR PRECISE LOCATION	► STREET ADDRESS OR PRECISE LOCATION
5307 BileHorn	
CITY	CITY
Trucker CA	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED  Over \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED  Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499\$500 - \$1,000\$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of
income of \$10,000 or more.	income of \$10,000 or more.
	<b>!</b> ]
of business on terms available to members of the pi and loans received not in a lender's regular course of	al lending institutions made in the lender's regular course ablic without regard to your official status. Personal loans of business must be disclosed as follows:
of business on terms available to members of the pi	ublic without regard to your official status. Personal loans of business must be disclosed as follows:
of business on terms available to members of the pi and loans received not in a lender's regular course of NAME OF LENDER*	ublic without regard to your official status. Personal loans of business must be disclosed as follows:  NAME OF LENDER*
of business on terms available to members of the pi and loans received not in a lender's regular course of	ublic without regard to your official status. Personal loans of business must be disclosed as follows:
of business on terms available to members of the pi and loans received not in a lender's regular course of NAME OF LENDER*  ADDRESS (Business Address Acceptable)	NAME OF LENDER*  ADDRESS (Business Address Acceptable)
of business on terms available to members of the pi and loans received not in a lender's regular course of NAME OF LENDER*	ublic without regard to your official status. Personal loans of business must be disclosed as follows:  NAME OF LENDER*
of business on terms available to members of the pi and loans received not in a lender's regular course of NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER
of business on terms available to members of the pi and loans received not in a lender's regular course of NAME OF LENDER*  ADDRESS (Business Address Acceptable)	NAME OF LENDER*  ADDRESS (Business Address Acceptable)
of business on terms available to members of the pi and loans received not in a lender's regular course of NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER
of business on terms available to members of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not re	NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)
of business on terms available to members of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's regular course of the pit and loans received not re	NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)
of business on terms available to members of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's received not received n	NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  None  None
of business on terms available to members of the pit and loans received not in a lender's regular course of the pit and loans received not received	NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  HIGHEST BALANCE DURING REPORTING PERIOD
of business on terms available to members of the pit and loans received not in a lender's regular course of the pit and loans received not received no	NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000
of business on terms available to members of the pit and loans received not in a lender's regular course of the pit and loans received not in a lender's rec	ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  When the properties of the p

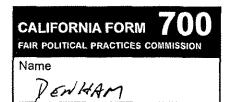
#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name DENHAM

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
JC Williams cost	EZATH bound Form
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
2350 W. MONTE VISTA TUMOCK CA	1721 San JUAN HWY SON SUAN BANTISM
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Kedl ESTATE	BUSINESS ACTIVITY, IF ANY, OF SOURCE ASTICUTIVE PROJECTS 95
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
INVESTER	Slouse of Enfloyee
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 S1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of(Property, car, boat, etc.)	Sale of
1	(Property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other	Other
(Describe)	(Describe)
l l	
► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIO	
You are not required to report loans from commercial of a retail installment or credit card transaction, made	ending institutions, or any indebtedness created as part
available to members of the public without regard to ye	
not in a lender's regular course of business must be d	
•	INTEREST RATE TERM (Months/Years)
NAME OF LENDER*	MILALS MILE ILAM (MOINES TEALS)
ADDRESS (Business Address Acceptable)	% None
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	Ch.
\$1,001 - \$10,000	City
S10,001 - \$100,000	Guarantor
OVER \$100,000	Other
	(Describe)
Comments:	

# SCHEDULE D Income - Gifts



ADDRESS (Business Address Acceptable)  758 RIVERINAL WISH SUCCEPTENTO CA. BUSINESS ACTIVITY, IF ANY, OF SOURCE  1 9 15 12 TIVE VOUND TO BE CRIPTION OF GIFT(S)  DATE (mm/dd/yy) VALUE  DESCRIPTION OF GIFT(S)  7 25,09 5 420 6HT W.J.		
ADDRESS (Business Address Acceptable)  Business Address Acceptable)  ADDRESS (Business Address Acceptable)  Business Address Acceptable)  ADDRESS (Business Address Acceptable)  Business Activity, if Any, of Source  DATE (immidolyy) Value Description of Gift(s)  DATE (immidolyy) Value Description of Gift(s)	▶ NAME OF SOURCE	
RUSHESS ACTIVITY, IF ANY, OF SOURCE  BUSINESS ACTIVITY, IF ANY, OF SOURCE  W. S. 1-1-1-1-1-1-1  DATE (minidary) VALUE  DESCRIPTION OF GIFT(S)  DISINESS ACTIVITY, IF ANY, OF SOURCE  LY 109 S 15050 Brief CSC  12 4 9 S 593 CAFFED OF SOURCE  LY 109 S 5	Louteil for legislative Execuliante	
BUSINESS ACTIVITY, IF ANY, OF SOURCE    M. S.   1505   Brief CSE     12	ADDRESS (Business Address Acceptable)	
DATE (minidalyy) VALUE DESCRIPTION OF GIFT(S)  12, 4, 91	BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
15 4 10 4 5 5 5 5 5 5 6 5 2	ly:slitive summit	40 Committee
12, 4, 8 S 43 CASTINITY S  NAME OF SOURCE  (POVANIA'S CASTESS (Business Acceptable)  NAME OF SOURCE  12 31512TIVE SOURCE  12 31512TIVE SOURCE  12 31512TIVE DESCRIPTION OF GIFT(S)  7 25,09 S 420 CHT CAST  NAME OF SOURCE  ADDRESS (Business Address Acceptable)  Business Address Acceptable)	A	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
NAME OF SOURCE  ADDRESS (Business Address Acceptable)  7.58 KIVELLY AND ALLE DESCRIPTION OF GIFT(S)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  1. 9 15 15 TWO DUNA TOLLO  DATE (mmiddlyy) VALUE DESCRIPTION OF GIFT(S)  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mmiddlyy) VALUE DESCRIPTION OF GIFT(S)  S  DATE (mmiddlyy) VALUE DESCRIPTION OF GIFT(S)  S  DATE (mmiddlyy) VALUE DESCRIPTION OF GIFT(S)  S  DATE (mmiddlyy) VALUE DESCRIPTION OF GIFT(S)		6,15,09,62 Wine Desper
NAME OF SOURCE  (POUNDA'S CUP for 2)25 ion  ADDRESS (Business Address Acceptable)  758 RIVERSY AL. West Societies TO LA. BUSINESS ACTIVITY, IF ANY OF SOURCE  12 4 15 12 T NR DULY TO BESCRIPTION OF GIFT(S)  7, 25 109 5 420 Lift Wd  S. NAME OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mmiddiyy) VALUE DESCRIPTION OF GIFT(S)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mmiddiyy) VALUE DESCRIPTION OF GIFT(S)	124, of & 46° Fleece	
ADDRESS (Business Address Acceptable)  758 RIVER AND ALL WISH SACREMENTO CA. BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/dolyy) VALUE DESCRIPTION OF GIFT(S)  PARKE OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  ADDRESS (Business Address Acceptable)  Refull (Carly STAT) Control of Contr	124,09 , 5933 cuffinks	\$
ADDRESS (Business Address Acceptable)  758 RVILLEY M. WEST SUCCESSUS CONTROL OF SURVEY OF SOURCE  BUSINESS ACTIVITY, IF ANY, OF SOURCE  1.4 15 15 TWC FOUND TOLLIC  DATE (mm/adiyy) VALUE DESCRIPTION OF GIFT(S)  7. 25/09 \$ 420 List Cost  1.4 5 SUSINESS ACTIVITY, IF ANY, OF SOURCE  ADDRESS (Business Address Acceptable)  NAME OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/adiyy) VALUE DESCRIPTION OF GIFT(S)	► NAME OF SOURCE	
BUSINESS ACTIVITY, IF ANY, OF SOURCE    1		
1 4 15 1 STIVE FOUND TOLK   DATE (mmiddlyy) VALUE   DESCRIPTION OF GIFT(S)		1800 diggore 1 rd. Alexander DVA 22319
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  7, 25, 09		
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	7,25,09 5420 bift W.J	7,1209 , 396 03 SUOMODOTIONS
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  J	NAME OF SOURCE	▶ NAME OF SOURCE
DATE (mm/dd/yy)         VALUE         DESCRIPTION OF GIFT(S)	ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
	BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
		\$
s		s
Comments:		
Comments:		
Comments:	Commenter	
	Comments:	

# SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

- Reminder you must mark the gift or income box.
- · You are not required to report income from government agencies.

NAME OF SOURCE  Chiquita Fresh Sypanss	► NAME OF SOURCE
Chiquita Fresh Express  ADDRESS (Bushess Address Acceptable)  950 E. Blanco Road	ADDRESS (Business Address Acceptable)
CITY AND STATE Salings, CA 93901	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE Produce	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): 9/14/09 · 9/16/69 AMT: s 407.54	OATE(S):
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one) Gift Income
OESCRIPTION: Travel to 1 from	OESCRIPTION:
conference	
NAME OF SOURCE	▶ NAME OF SOURCE
AODRESS (Business Address Acceptable)	AOORESS (Business Address Acceptable)
CITY AND STATE	CITY ANO STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
OATE(S):	OATE(S):
TYPE OF PAYMENT: (must check one)	TYPE OF PAYMENT: (must check one)
DESCRIPTION:	DESCRIPTION:
Comments:	